

Response to reviewers

Buenos Aires, July 17, 2016

Ref. Manuscript N° 26917

Manuscript Name: "Importance of Regional Renal Registries: Latin American Dialysis and Transplant Registry experience and contributions to the knowledge of ESRD epidemiology"

Dear Editor WJN

After the reviewers' revision, we resubmit the Manuscript entitled "Importance of Regional Renal Registries: Latin American Dialysis and Transplant Registry experience and contributions to the knowledge of ESRD epidemiology".

The manuscript was revised, according the reviewers' comments. The answers are detailed below, and are highlighted in the manuscript.

About the suggestion to add a table including Rate afflicted per Million, Number per Million on Dialysis (Hemo and Peritoneal), and Number per Million receiving a Kidney Transplant (Deceased and Live Donors). Table 2 includes rates pmp of patients on Hemodialysis, Peritoneal Dialysis, Living with a functioning kidney transplant, incidence, number of transplants performed by country, percentage of deceased donors and rate in pmp of transplants performed. Table 3 was added, including number of incident patients, incidence rate and % of diabetics.

About the convenience of adding some data about Annual Survival, unfortunately the Latin American Dialysis and Transplant Registry, based on aggregated data, cannot calculate survival, nor compare results in terms of survival with other

registries. To clarify this point, a paragraph, under the subtitle *The future of the LADTR*, was added when describing the limitations of the LADTR.

The reviewer also raised very properly the need to include some data about diabetics, in order to improve the understanding of the problems faced by Nephrologists in Latin America. Under the subtitle *Prevalence and incidence of ESRD under RRT* a paragraph (paragraph 6) and a table (number 3) with data on RRT incident diabetics in 13 countries (covering 84.2% of total Latin American population) was included. Also, a comparison with the USRDS and the ERA/EDTA Registry incident diabetic's rate was added.

Orthographic mistakes were corrected. Figures clarity were improved.

Under the subtitle *Introduction*, the contributions of Italian immigration to Latin American current population were included, with a reference about the "Italian Diaspora" in the late 19 and early 20 centuries.

About the observation on the Gini index, the reviewer was right: Gini is the name of the person who developed the Gini Index. The name was re-written in lower case letters

We define previously, as suggested, Chronic Kidney Disease before the initials CKD

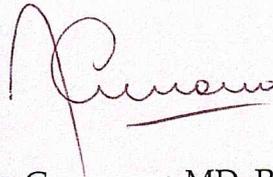
Reference 14 and 15 were placed in the proper order

Under the subtitle *Contributions for Improvement of Nephrology and ESRD knowledge and care in Latin America*, the valuable contributions of the Spanish Society of Nephrology was recognized.

In table 2, figures of countries population were corrected, and a foot note was added establishing data source.

About Mexico, since 2011 the LADTR decided to use Jalisco Renal Replacement data . Under the subtitle *The future of the LADTR*, the reason why the Registry use only Jalisco RRT data was added.

Respectfully yours,

A handwritten signature in red ink, appearing to read 'A. Cusumano', with a horizontal line underneath the name.

Ana Maria Cusumano MD, PhD